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To:	Amendment/ Reply	From:	Alishia Rowe-Babb
Fax:	(571) 273-8300	Pages:	___ (includes fax cover page)
Phone:		Date:	August ___ 2005
Rec:	Serial No. 09/912,252	CC:	

Case: 51876AUSM1

In re Application of: CROZE et al.

Serial No. 09/912,252

Filing Date: July 25, 2001

Items Faxed: Transmittal Form, Change Of Correspondence Address Application, and Response to Office Action Amendment/ Reply.

I hereby certify that this paper is being faxed to the office of Notice to File Missing Parts at facsimile (571) 273-8300 on August ___ 2005

A handwritten signature in black ink, appearing to read "A. L. Rowe-Babb".

Alishia L. Rowe-Babb

8 - 1 - 05

Date of Signature

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Approved for use through 07/31/2008, OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

09/812,252

Filing Date

July 25, 2001

First Named Inventor

CROZEE et al.

Art Unit

1636

Examiner Name

Q. Nguyen

Attorney Docket Number

51876AUSM1

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.63		
<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD		
Remarks This Amendment/Reply is being submitted via facsimile to the USPTO, Group Art Unit 1636, Central Fax No. (571) 273-6300		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	BERLEX BIOSCIENCES		
Signature	<u>Wendy L. Washtien</u>		
Printed name	Wendy L. Washtien		
Date	August 1, 2005	Reg. No.	36,301

CERTIFICATE OF TRANSMISSION/MAILING

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Alishia L. Rowe-Babb

Date August 1, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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